OST - Ostomy

OST-AP ANATOMY AND PHYSIOLOGY

OUTCOME: The patient/family will have a basic understanding of the anatomy and physiology of the function of the affected organ.

STANDARDS:

- 1. Discuss the anticipated duration of the ostomy (temporary or permanent).
- 2. Explain the anatomy and functions of the affected organ. Identify and explain the patient's ostomy type.
- 3. Explain the normal characteristics, function, and classification of the stoma. Explain the color, consistency, amount and frequency of output expected from the ostomy.

OST-C COMPLICATIONS

OUTCOME: The patient/family will understand the common and important complications from the ostomy.

STANDARDS:

- 1. Explain that complications may be delayed, minimized, or prevented with prompt treatment.
- 2. Review with the patient/family the signs and symptoms of the common and important complications of the ostomy, e.g., wound infections, peristomal skin breakdown, intestinal obstruction, hemorrhage, peristomal hernia, stoma prolapse, stoma structure, stoma retraction, and stoma necrosis.
- 3. Discuss symptoms that would require the patient to seek medical attention, such as abnormal abdominal distention; vomiting; blood from the stoma; dusky, dark red, purplish, brown or black stoma; separation between skin and stoma; non-healing peristomal skin irritation or breakdown; lack of output beyond the expected time interval; abdominal pain, protrusion of viscera from stoma, or unusual bulging around the stoma.
- 4. Discuss the importance of following the prescribed treatment plan, including diet, exercise, medications, hygiene and stress management to help prevent complications.

OST-DP DISEASE PROCESS

OUTCOME: The patient/family will understand the pathophysiology, symptoms, and prognosis of the disease or condition related to the patient's colostomy.

STANDARDS:

- 1. State the definition of the specific disease or condition related to the colostomy and its effects on the body (**Refer to** Cancer **CA**, Crohn's, Disease **CRN**, Diverticulitis/Diverticulosis **DIV**, and Ulcerative Colitis **UC**).
- 2. Review the causative factors of the disease or condition as they relate to the patient.
- 3. Discuss signs and symptoms and usual progression of the disease or condition.

OST-EQ EQUIPMENT

OUTCOME: The patient/family will understand and demonstrate the proper use and care of the ostomy system.

STANDARDS:

- 1. Refer to ostomy specialty nurse, if available, for selection and fitting of colostomy pouching system.
- 2. Discuss the types and features of ostomy appliance systems. Discuss the indications for and benefits of the prescribed ostomy appliance system.
- 3. Discuss and demonstrate proper use, care, storage, and disposal of ostomy system. Participate in return demonstration.
- 4. Discuss the frequency of evaluation of the ostomy system.
- 5. Emphasize safe use of the ostomy system e.g., avoid using sharps around pouch, avoid using pin holes in pouch.
- 6. Inform patient of local ostomy product suppliers and costs, as appropriate. Refer to resources for assistance with ostomy supplies, as appropriate.

OST-EX EXERCISE

OUTCOME: The patient/family will understand the relationship of physical activity to the disease state or condition and to the feelings of well being and will develop a plan to achieve an appropriate activity level.

- 1. Advise the patient to consult with a healthcare provider before starting any exercise program.
- 2. Explain the benefits of a regular exercise program to health and well being including reduced stress, better sleep, bowel regulation, improved self image, and a sense of well being. **Refer to HPDP-EX.**
- 3. Review the basic exercise or activity recommendations of the treatment plan including activity or exercise restrictions.
- 4. Refer, as appropriate, to community resources or Physical Therapy.

OST-FU FOLLOW-UP

OUTCOME: The patient/family will understand the importance of follow-up in the treatment of ostomy.

STANDARDS:

- 1. Discuss the importance of follow-up care. Write down questions that can be discussed at the follow-up visit. Discuss the individual's responsibility in the management of the patient's colostomy.
- 2. Review the treatment plan with the patient emphasizing the need for making and keeping appointments in order to prevent complications and to make necessary adjustments in medications or treatment.
- 3. Discuss the signs and symptoms of exacerbation or worsening of the disease that should prompt immediate follow-up.
- 4. Discuss the availability of community resources, including transportation, and support services and refer as appropriate.

OST-HM HOME MANAGEMENT

OUTCOME: The patient/family will understand, develop, and implement a plan for home management of ostomy.

- 1. Demonstrate and receive return demonstration of ostomy care, as appropriate, including the following:
 - a. Cleansing of stoma, peristomal skin care.
 - b. Emptying and cleansing of pouch.
 - c. Measuring stoma for correct pouch size and application of ostomy pouch.
 - d. Irrigating the colostromy.
 - e. Burping the colostomy pouch.
 - f. Avoiding pinholes in the pouch.
 - g. Storing and disposing of ostomy supplies.
- 2. Emphasize the importance of good personal hygiene. Refer to **HPDP-HY.** Discuss methods of controlling odor with deodorant drops, bismuth/chlorophyll preparations or parsley.
- 3. Refer, as indicated, to an enterostomal therapist, the United Ostomy Association (800-826-0826) or other local support group for ostomates and other interested persons. Refer to home health, as needed.

OST-L LITERATURE

OUTCOME: The patient/family will receive literature about ostomy.

STANDARDS:

- 1. Provide the patient/family with literature on ostomy.
- 2. Discuss the content of the literature.

OST-LA LIFESTYLE ADAPTATIONS

OUTCOME: The patient/family will understand what lifestyle adaptations are necessary to cope with the patient's specific disorder and how diet and activity will interact with the ostomy.

STANDARDS:

- 1. Encourage resumption of activities of daily living. Discuss, as appropriate, adaptations that might be necessary to participate in sports, e.g., caution when participating in contact sports, use of belt or abdominal binder for extra security, framing edges of pouch with waterproof tape for swimming.
- 2. Explain that modification of clothing is usually not necessary. Discuss any clothing issues that apply or are of concern to the patient/family. Discuss having an ostomy supply kit available to deal with unplanned excrement during work or travel.
- 3. Encourage verbalization of feelings about the ostomy, body image changes and sexual issues and acknowledge that negative feelings toward the ostomy are normal. Explain, when appropriate, that an ostomy does not preclude a successful pregnancy.
- 4. Discuss methods of concealing the pouch during intimacy, such as pouch covers, caps, or mini pouches. As indicated, recommend different positions and techniques for sexual activity to decrease stoma friction and skin irritation.
- 5. Encourage the patient/family to utilize the usual support systems, such as family, church, traditional healers and community groups. Refer to Behavioral Health and other community resources as necessary.

OST-M MEDICATIONS

OUTCOME: The patient/family will understand the purpose, proper use, and expected outcomes of prescribed drug therapy.

STANDARDS:

1. Describe the name, strength, purpose, dosing directions, and storage of the medication.

- 2. Discuss the risks, benefits, and common or important side effects of the medication and follow up as appropriate.
- 3. Discuss any significant drug/drug, drug/food, and alcohol interactions, as appropriate.
- 4. Discuss the importance of keeping a list of all current prescriptions and over-the-counter medicines, vitamins, herbs, traditional remedies, and supplements. Encourage the patient to bring this list and pill bottles to appointments for medication reconciliation.

OST-MNT MEDICAL NUTRITION THERAPY

OUTCOME: The patient/family will understand the specific nutritional intervention(s) needed for treatment or management of the ostomy.

STANDARDS:

- 1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
 - a. Assessment of the nutrition related condition.
 - b. Identification of the patient's nutritional problem.
 - c. Identification of a specific nutrition intervention therapy plan.
 - d. Evaluation of the patient's nutritional care outcomes.
 - e. Reassessment as needed.
- 2. Review the basic nutrition recommendations for the treatment plan.
- 3. Discuss the benefits of nutrition and exercise to health and well-being.
- 4. Assist the patient/family in developing an appropriate nutrition care plan.
- 5. Refer to other providers or community resources as needed.

OST-N NUTRITION

OUTCOME: The patient/family will understand the role of nutrition and to assist in the control of the ostomy function.

- 1. Assess current dietary habits to determine patterns and preferences. Identify any bowel irritants.
- 2. Recommend consistency and moderation in dietary habits.
- 3. Discuss gas-forming and odor-producing foods, such as beans, cabbage, broccoli, Brussels sprouts and cauliflower. Stress the trial-and-error method to establish which foods can be tolerated. Discuss introducing new foods one at a time.

- 4. Discuss eating slowly, no excessive talking, chewing food well, and eating regular meals. Stress avoiding carbonated beverages, drinking with a straw, and temperature extremes of foods.
- 5. Recommend that the patient should avoid foods that contribute to diarrhea, such as prunes, coffee, fruit juices, alcohol, and certain fruits and vegetables. Discuss foods that provide bulk, such as applesauce, bananas, smooth peanut butter, cheese, boiled rice, and yogurt. Refer to a registered dietitian for MNT.

OST-SM STRESS MANAGEMENT

OUTCOME: The patient/family will understand the role of stress management as it relates to bowel function.

- 1. Explain that uncontrolled stress can increase constipation or diarrhea, abdominal pain, and fatigue.
- 2. Explain that effective stress management may help reduce the severity of constipation or diarrhea, abdominal pain, and fatigue, as well as, helping to improve health and a sense of well-being.
- 3. Discuss that stress may exacerbate adverse health behaviors such as increased tobacco, alcohol, or other substance use as well as inappropriate eating, all of which can increase the risk of morbidity. **Refer to OST-N.**
- 4. Discuss various stress management strategies which may help maintain a healthy lifestyle. Examples may include:
 - a. Becoming aware of your own reactions to stress
 - b. Recognizing and accepting your limits
 - c. Talking with people you trust about your worries or problems
 - d. Setting realistic goals
 - e. Getting enough sleep
 - f. Maintaining a healthy diet
 - g. Exercising regularly
 - h. Taking vacations
 - i. Practicing meditation, self-hypnosis, and positive imagery
 - j. Practicing physical relaxation methods such as deep breathing or progressive muscular relaxation
 - k. Participating in spiritual or cultural activities
- 5. Provide referrals as appropriate.

OST-WC WOUND CARE

OUTCOME: The patient/family will understand and demonstrate the procedure for ostomy related wound care.

- 1. Explain the reasons for appropriate stoma care, e.g., decreased infection rate, decreased odor, decreased peristomal skin breakdown.
- 2. Discuss signs and symptoms that should prompt immediate follow-up, e.g., peristomal skin redness, breakdown or discharge, change in stoma color, decreased drainage, diarrhea, abdominal distention with cramping pain, nausea, vomiting, enlargement of stoma, unattainable pouch seal, or moderate bright red stomal drainage. **Refer to OST-HM.**